U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF 025 HADZ	PROSÉ		COURT CASE NUM	BER	
DEFENDANT	1.000		TYPE OF PROCESS	<u></u>	
Domestic Kela	tions Sec	Etial			
SERVE NAME OF INDIVIDUAL COMPANY NAME OF INDIVIDUAL COMPANY NAME OF INDIVIDUAL COMPANY ADDRESS (Street or RFD, Apartment)	+JE		CRIPTION OF PROPERTY TO	O SEIZE OR CONDEMN	
1201 West 84	h St Fra	,RA 16502	Gestleme	is Ouricha	жc
SEND NOTICE OF SERVICE COPY TO REQUESTER A		SS BELOW	Number of process to be served with this Form 285	is goar je	13.
COREY HARRIS		23.2.	Number of parties to be served in this case		
LEsie, Paltos			Check for service on U.S.A.		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION All Telephone Numbers, and Estimated Times Available (N EXPEDITING SER	VICE (Include Business and A	Stermete Aldresses,	
All I acquiring (vanishers, who Estimated Times Available)		D		Feld	
	FEB 13 2	006			
V.	CLERK, U.S. DISTRIC	T COURT			
Signature of Attorney other Originator requesting service on	tetalf of: OF RENK	SYLVA LAINTIFF TE	LEPHONE NUMBER	DATE	
Core Hanis TROS		EFENDANT	VIA E-C. ?.	8/07/05	
SPACE BELOW FOR USE OF U.S.	MARSHAL ON	LY-DO NOT	WRITE BELOW	THIS LINE	
l acknowledge receipt for the total Total Process District number of process indicated.	of District to Serve	Signature of Authorize	d USMS Deputy or Clerk	Date 0) ,
(Sign only for USM 285 if more than one USM 285 is submitted) No.	8 1008	83_		1/04/05 -	Y ₁₁ /2-
hereby certify and return that ! have personally served , have legal evidence of service, have executed as shown in "Remarks", the process described on the individual , company, corporation, etc., at the address shown above on the on the individual , company, corporation, etc., shown at the address inserted below.					
I hereby certify and return that I am unable to locate the i	ndividual, company, cor	poration, etc. named ab	ove (See remarks below)		
Name and title of individual served (if not shown above)			A person of suitab thea residing in de of abode	le age and discretion (fendant's usual place	
Address (complete only different than shown above)			Date 2/3/04	Time San	-7
	. <u>.</u>		Signature of U.S. Mar	or Downy	
corice For Total Mikeage Charges Forwarding Fee including endeavors)	Total Charges	Advance Deposits	Amount owed by U.S. Marshall (Amount of Refund*)	or	
759 72-22	4/=		<u> ≠137°</u>	+ 22 	
EMARKS: TO EREL 817-05			-		

- PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD

 - 3. NOTICE OF SERVICE
 - 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal
 - 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00